



New Report: Under-Investment in Public Health Leaves Nation Less Prepared for Current and Future Health Risks

COVID-19 Emergency Funding Helped Control the Pandemic, but Did Not Address Structural Weaknesses in the Nation's Public Health System



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Decades of underfunding have left the nation's public health system ill-equipped to protect the health of Americans, according to a report, *The Impact of Chronic Underfunding on America's Public Health System: Trends, Risks, and Recommendations, 2023*, released today by Trust for America's Health (TFAH).

This annual report examines federal, state, and local public health funding trends and recommends investments and policy actions to build a stronger public health system, prioritize prevention, and address the ways in which social and economic inequities create barriers to good health in many communities.

We also invite you to join TFAH and the Coalition for Health Funding on June 20th at 3 PM Eastern for a [virtual Congressional briefing](#) with a panel of experts to discuss the longstanding gaps in public health capacity resulting from chronic underfunding and solutions for policy action.

[Read the Report](#)

Key Findings

- Emergency funding is important for short-term responses but is not sufficient to address systemic weaknesses in the nation's public health infrastructure.
- Foundational public health capacities, including data systems, public health laboratory capacity, the public health workforce, and public health communications, require increased, flexible, and sustained funding.
- The nation is at risk of returning to a boom-and-bust pattern of sporadic funding increases for public health during emergencies followed by insufficient funding in non-emergency periods.
- Funding for two key emergency preparedness and response programs is down by half or more over the past two decades.
- Insufficient funding has limited the accessibility and impact of evidence-based public health programs in many communities.

Priorities for Policy Action

- Congress should provide at least \$11.581 billion in FY 2024 funding to the Centers for Disease Control and Prevention (CDC), the level requested in the President's FY 2024 budget.
- Increase and sustain disease-agnostic funding to strengthen public health infrastructure.
- Strengthen public health emergency preparedness, including within the healthcare system. Investments should include restoration of funding to the Public Health Emergency Preparedness Cooperative Agreement, the Healthcare Readiness and Recovery Program, and programs designed to support vaccine infrastructure as well as prevent, detect, and contain antimicrobial-resistant infections.
- Modernize the public health data system to ensure comprehensive and real-time data sharing during public health emergencies. Congress should also provide sustained funding for CDC's new Center for Forecasting and Outbreak Analytics.
- Bolster the recruitment and retention of the public health workforce. The one-time nature of short-term emergency funding means that health departments will continue to experience understaffing.
- Address health disparities and the root causes of disease by addressing the social determinants of health and investing in chronic disease prevention.
- Invest in programs to prepare for and mitigate the impacts of climate change.

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